

Utah Behavioral Health Planning and Advisory Council Meeting
Monday, August 27, 2012 2-3:30pm,
Multi-Agency State Office Building (MASOB)
195 N 1950 W, Salt Lake City
Conference Room 1020 A and B

“Our mission is to ensure quality behavioral health care in Utah by promoting collaboration, advocacy, education, and delivery of services.”

Attendees: Kim Myers, Scott Boyle, Karen Greenwell, Brandon Hatch, David Mathews, Kent Palmer, Darrell Boldt, Kevin Foote, Margo Halliday, Ginger Phillips, Lynda Krause, Eileen Maloney, Carol Buffi, Carol Ruddell, Valerie Fritz, Lola Davis, Julie Hardle, Renee Chipman, Dan Braun, Lori Cerar, Paul Korth, Jenn Oxborrow, Doug Thomas, Rick Hendy, Roy Castelli, Robert Snarr, Dinah Weldon, Carmen Lloyd, Susan Hardinger

Excused: MaryJo McMillaan, Amy Buehler

Telephone: Alison Nitsche

1. Welcome and Introductions- Lori Cerar
 Overview of UBHPAC
 Read the Mission Statement
2. Review and requested approval of June Minutes- Lori Cerar
 Ginger Phillips made the motion to approve, Carol Ruddell seconded. All were in favor.
 Format of future minutes will change to a simplified format.
3. Council Transformation Committee Update-Eliot Sykes
 Interim Policies and Procedures – Reviewed and approved at the prior UBHPAC (see June 2012 Minutes).

UBHPAC and Committee Membership – Wording changed to “We will solicit 50% Peer representation”; Changed from “Shall have no less than 50% peer representation”.

UBHPAC supported the creation of three initial UBHPAC Sub-Committees: Budget, Membership, and Programs.

Membership interim sub-committee organized- chair: Eileen Maloney assisted by Darrell Boldt, Kim Myers and Dan Braun. Eliot Sykes called for a motion to establish the Membership Committee, Ginger Phillips seconded the motion. All were in favor.

Dialogue followed the vote, focused on the importance of obtaining UBHPAC representation to include MH, SA, Prevention, Child and Youth and peers/consumers.

Staff from the Division and UBHPAC members commented on the importance of commitment to peer/consumer involvement in the UBHPAC . The different areas of participation are peer, partner, advocates, family and provider.

Those present agreed it is still essential to have 50% quorum required to vote.

More outreach to peers is needed and obstacles such as time, location and technology were indicated as barriers. Eliot Sykes reported the Transformation Committee does have 50% peers representation. Dinah Weldon, with Darrell Boldt, to look into CAP NET in order to improve virtual access to UBHPAC meetings.

UBHPAC membership will require an application form and will be formalized by a UBHPAC vote on membership by December 2012. A sample Council Membership form, developed by Colorado, was circulated and will be emailed to the committee for adaptation and review with the Transformation Committee in September; final UBHPAC membership forms will be provided to those interested in formalizing attendance at UBHPAC meetings as a voting member. The membership Committee will accept and review applications between September-October 2012, and will present recommendations for UBHPAC membership to the Transformation Committee at the October Council meeting. Prospective UBHPAC members will be asked to commit to a minimum of 12 months of regular UBHPAC meeting attendance in order to support a positive transformation and integration efforts for the UBHPAC.

Jenn Oxborrow will follow-up with Aaron Gardner about the consumer/peer input on the informational brochure explaining the purpose of UBHPAC and the opportunities for being involved in the work of the Council. The informational piece will provide helpful information to consumers/peers and others interested in attending the UBHPAC and will be added to DSAMH website.

4. Consumer, Public and Council Member Announcements/Requests

Kim Myers, NAMI Utah- Working with a small group on Army One Source to help providers complete the online course so they can learn how to support military service members.

NAMI Walk – September 29

Carol Ruddell, Dept of Health—Fundraiser for 30th anniversary event for the Diocesan Commission for People with Disabilities Saturday September 29, 2:00 pm- Mass at St. Francis of Assisi Parish 65 E 500 N Orem Movie & refreshments \$5/person or \$10/ Family. For more information-Dolores 801-328-8641 ext 333 or Carol 801-440-8729

September 15 is Recovery Day at the Gallivan Center in SLC 9 am – 3 pm.

5. DSAMH Announcements-brief reports-leadership report and Block Grant budget update
Suicide Prevention Coalition—Developing a public awareness campaign and working with other states to develop specific strategies to address the growing suicide rates in Utah.

Miriam Hyde wrote a letter looking for support for her efforts representing persons with disabilities at the Democratic National Convention. Copy of the letter was on hand for review.

Block grant application and report updates-Jenn Oxborrow reported that the SAMHSA block grant report due September 1 on fiscal year 2013 planned expenditures is underway and anticipated to be complete on August 30.

Paul Korth will provide the UBHPAC with updated block grant budgets prior to December 2012 and will respond to the UBHPAC's request for technical assistance on budget development. Federal fiscal year 10 and 11 MH Block Grant funds are exhausted as they have been allocated and used on a first in first out schedule; federal block grant awards for FY12 are currently being used and have a two year window for expenditure under federal law 102321.

DSAMH -DSAMH Leadership, Doug Thomas-summarized the current priorities of the legislature's interim social services appropriation committee and the health care reform task force. Governor Herbert has reported he will wait until after the election to decide about the federal implementation requirements to expand Medicaid in Utah.

DSAMH leadership is visiting Local Behavioral Health Authorities throughout the state to meet with directors and key staff to see where the Division can support the Authorities ability to provide services in their regions.

6. Comments—DSAMH Leadership and Kim Myers-- Regarding the essential insurance benefit package; the legislature is recommending a plan than limits the inpatient mental health benefit to 30 days and outpatient benefits limited to 8 per year, which is does not meet the requirement of parity.

The next UBHPAC meeting: September 24, 2-330 pm, MASOB, room 1020A and B